

# Kawartha Lakes Paramedic Service

Addressing Gaps in Senior Services



### THE MUNICIPALITY





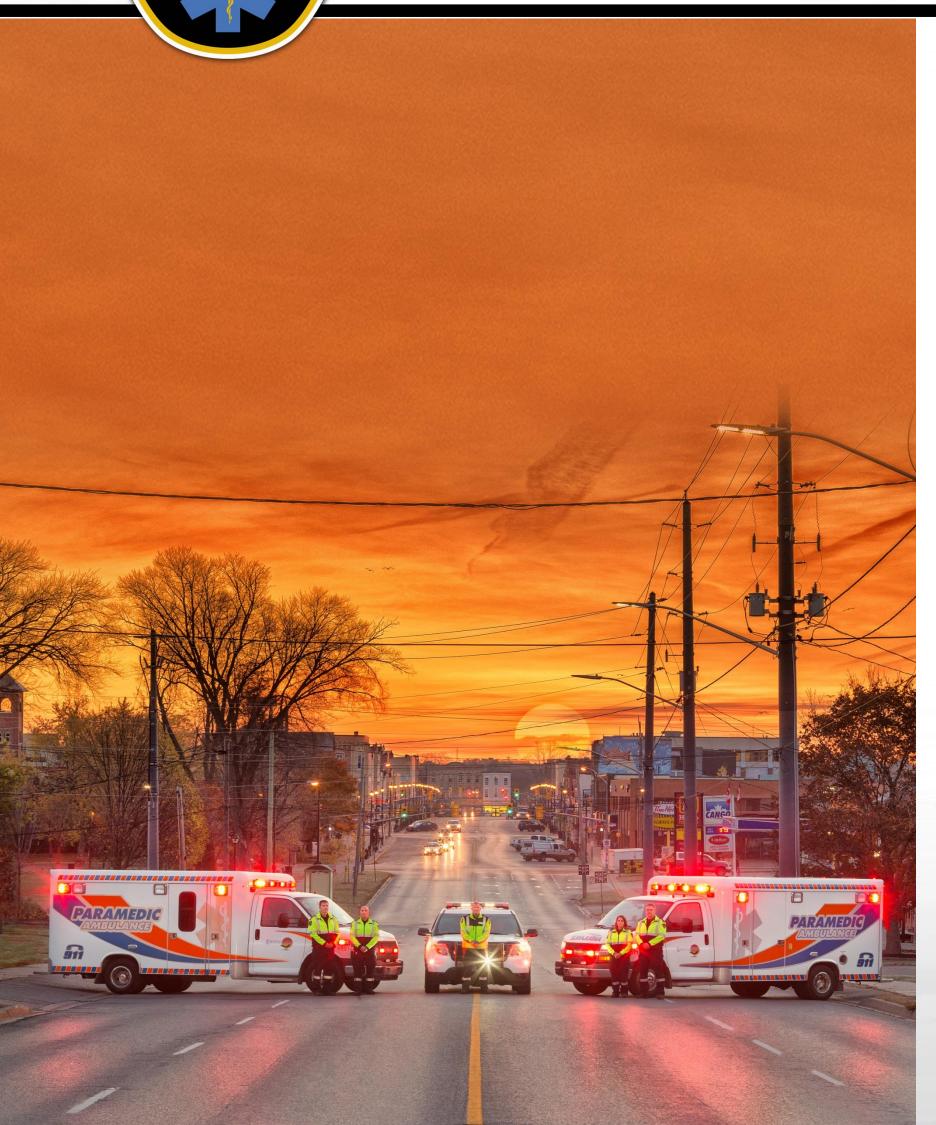
- 75,000 permanent and 30,000 seasonal residents
- ➤ 3,080 km² second largest municipality in Ontario by land area (after Greater Sudbury)
- 25% CKL population is 65 years and over versus provincial 17%
- Ambulance operations supported 50% by municipal tax, 50% provincial grant
- Municipality supports 100% ambulance capital budget





### THE PARAMEDIC SERVICE

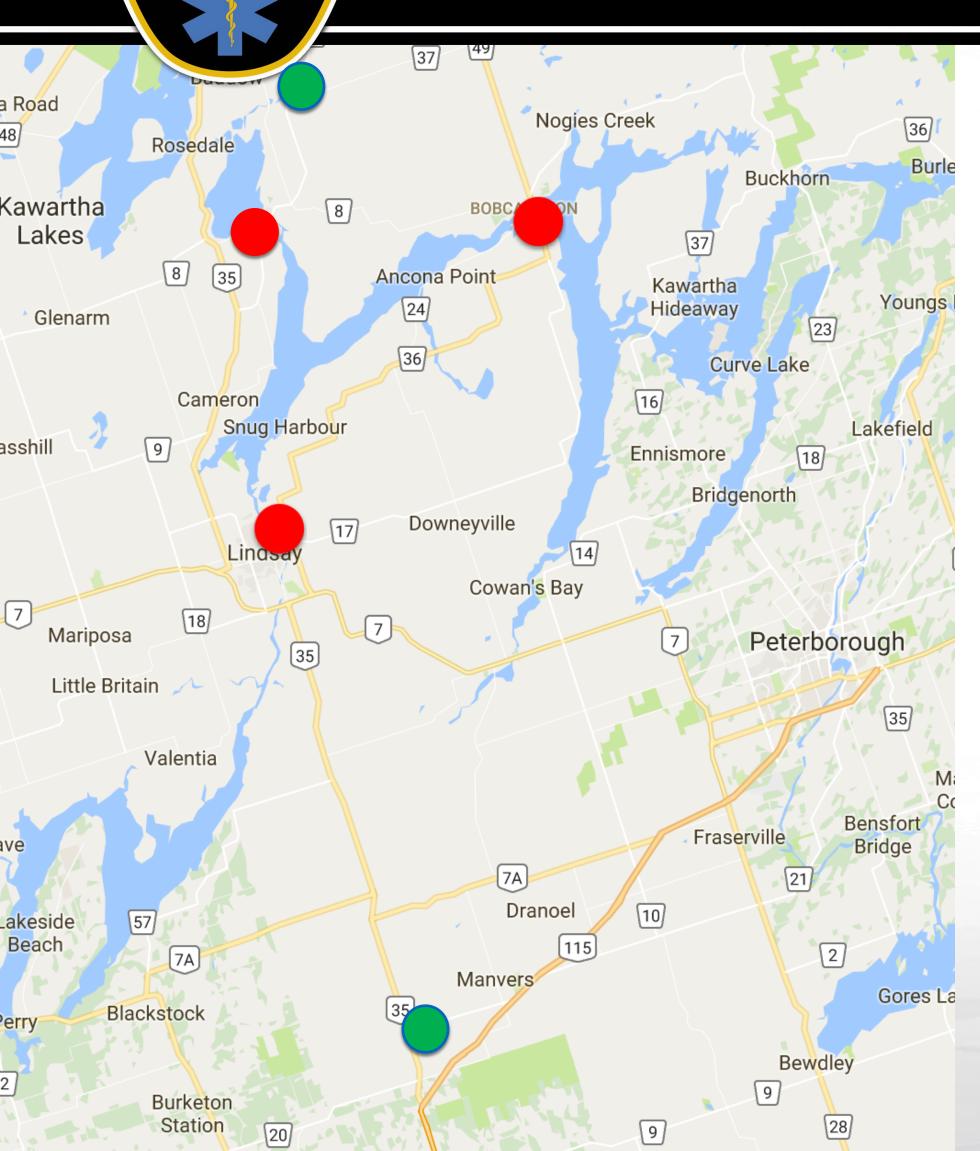




- Joined municipality in 2002
- 6 ambulances on days, 4 on nights, 1 Supervisor (ERU),
   1 seasonal
- > 23,000 calls/year, 11,400 transports to hospital in 2018
- > 80 Paramedics, 10 Support staff
- 2 levels of care; Primary and Advanced (with intermediate PCP AIV)
- > 50% Full time staff is trained to ACP level
- Certification is regulated by MOHLTC, Base Hospital (Lakeridge Health), local Paramedic Service
- ➤ Training and evaluation 4X/year, CQI for performance



### BASES



#### **PRIMARY STATIONS**

- > Lindsay
  - > 2 24 hour ambulances, 1 -12 hour day ambulance
- > Bobcaygeon
  - > 1 24 hour ambulance
- > Fenelon Falls
  - > 1 24 hour ambulance

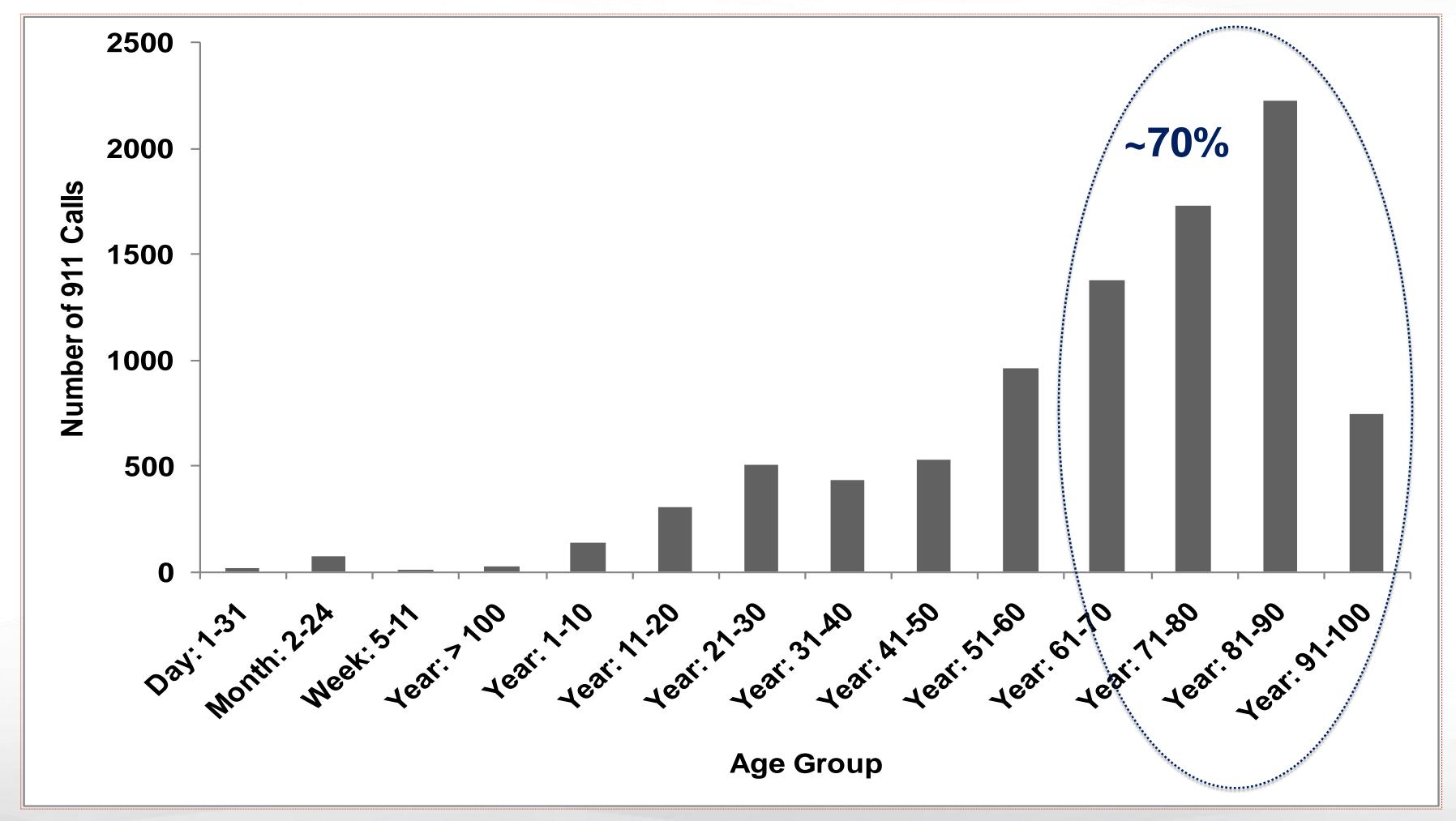
#### **SECONDARY STATIONS**

- > Coboconk
  - > 1 12 hour day ambulance Coboconk
- > Pontypool
  - > Staffed 11:00-23:00 Friday-Sunday





### 911 CALLS BY AGE GROUP, 2018







### CP ENDEAVORS...

#### **Proposed CP Home Visits (2017)**

- > Family Health Care Team and CKL Community Care (Primary Care & GAIN)
- Focus on vulnerable, at risk seniors; isolated patients, not connected to primary care, medically complex

#### **Proposed CP Home Visits (2019)**

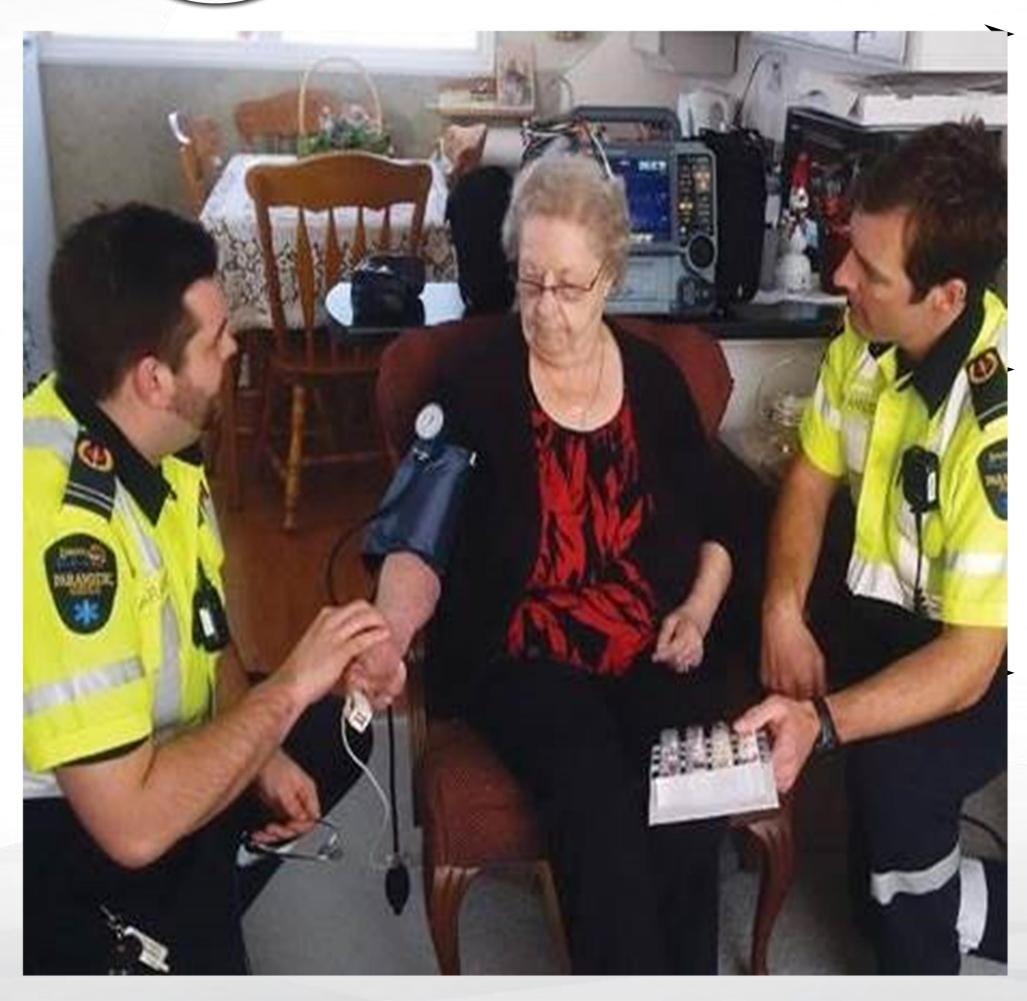
- Ross Memorial Hospital (Patient flow, ED and GEM)
- > Identification of high risk discharge patients and bridging the transition from hospital to home
- > 3 month pilot (\$25,000), Visit 5-6 patients/day 5 days a week, Goal to reduce 3 ALC patient readmission over 3 month period (\$500/day)
- > \$64,000 Return on program investment

\*Providing Health and environmental assessments, interventions and health teaching, liaise with primary care



### COMMUNITY PROGRAMS





#### Community Paramedic Program

- ➤ Est. in 2014
- ➤ 12 Paramedics + 1 coordinator
- > 1200 hour allocation

#### Public education and School programs

- 10,000+ hands only CPR, oversight of 200+ PAD sites, 400+ CPR certification in high-schools
- > Epipen, 911 program, car seat and helmet clinics

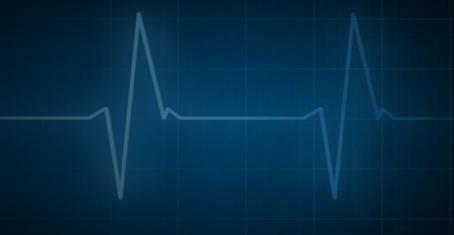
### Seniors Groups, Community Housing, Adult Day Programs

- How and when to call 911, what to prepare, Q/A
- Great feedback from senior population of feeling of preparedness and reduced anxiety





### OUR SENIOR 'SAFETY NET'



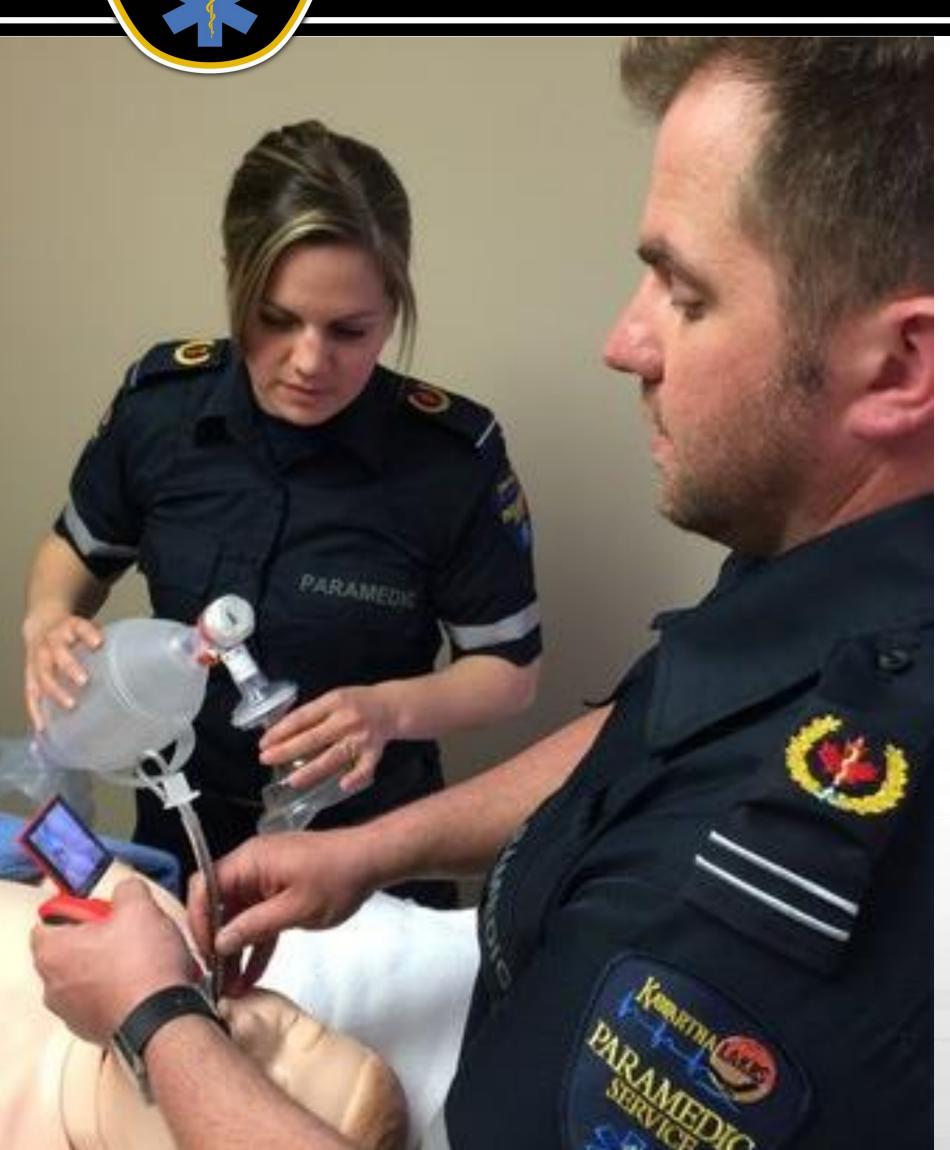
- Community Referral by CKL Paramedic Service
  - Collaboration with CELHIN (originally the CCAC) and CCCKL
  - > 2000 seniors referred to community based services
  - ➤ Referral is done electronically during 911 call





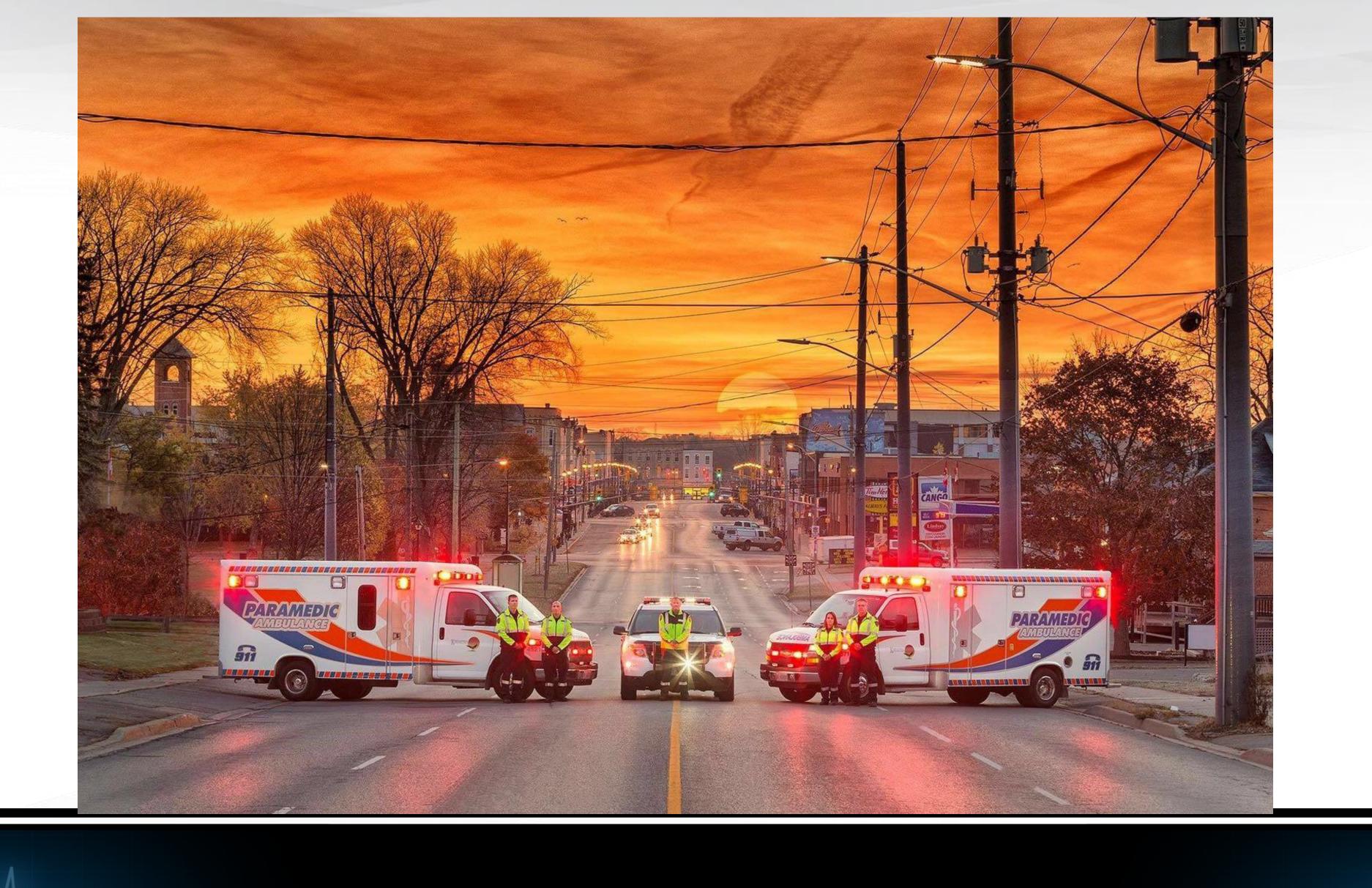


### THE FUTURE OF PARAMEDICINE



- Paramedicine is about caring for people and supporting their health needs
  - Uniquely positioned and trusted
  - First hand observation to environment
  - Paramedics are skilled but frustrated
    - Frequent callers, Unnecessary transports, increasing call volume and offload
- TREAT & RELEASE? Why can't Paramedics provide more care for patients in the home?
- Why can't we move or direct patients to most appropriate resource?





## QUESTIONS